Circuit Co	urt for _			City or County	C	ase No			
ame					Name				
treet Address				Apt. #	Street Address				Apt.
ity	State	Zip Code	Area Code	Telephone	City	State	Zip Code	Area Code	Telephone
	Plai	ntiff				D	efendant		
		COM	IPLA		BSOLUTE D M REL 20)	IVORCE	_		
		Your Name			, representin	ng myself	, state that	t :	
. The Defend				n					
in				Month	in a civi	Day il relig	ious ceren	Year nony.	
		ounty/State v	where Mar	ried	(Check	One)		J	
. Check all th	11 2								
_		•				Month/Year			
☐ My spo	ouse has li	ved in M	1 arylar	nd since:		Month/	7		
☐ The gro	ounds for	divorce	occurre	ed in the State	e of Maryland.	MOIIII	i ear		
. Check one:									
	e no child	lren toge	ther (s	kin naragranl	ns 5 and 6) or				
_		_							
— Му ѕрс	ouse and i	are the p	arems	of the follow	ring child(ren:)				
	Name Name			Date of Birth	_	Name		Date of Birth	
				Date of Birth	Name			Date of Birth	
				Date of Birth	Name			Date of Birth	
I know of th	Name	na ralata	d casas		the child(ren) or		uch as do		
		•		C	of parental righ	•			•
Court		se No.		Kind of Case	Year File	_	ılts or Sta		
- 			_		-			•	
. I have been	a party, w	itness, c	or other	rwise involve	d in the followir	ng cases a	bout custo	ody or	visitation
of the child	(ren):								
State	<u>C</u>	<u>ourt</u>		Case No.	Date of	f Child C	ustody Do	<u>etermi</u>	<u>nation</u>
	_								
Attach the 1	nost recer	nt court o	order fo	or the above-1	referenced court	cases.			

6.		of, or visitation with the child(ren):					
	Name	Current Address					
	Name	Current Address					
	Name	Current Address					
7.	The child(ren) are currently living	g with:					
8.	The child(ren) have lived in the form Time Period Place	Name collowing places, with the persons indicated during the last five years. Name(s)/Current Address of Person(s) with whom Child Lived ———————————————————————————————————					
9.	joint sole physical custod	ild(ren) that I have (check all that apply): dy of					
	visitation with	Name of Children					
10.	. I am am am not seeking alimo	ny because					
11.	(Check One) (You do not have to complete paragraph 11 if you are not asking the court to make decisions about your property.) My spouse and/or I have the following property (<i>check all that apply</i>)						
	☐ House(s) ☐	Furniture					
	☐ Pensions ☐	Bank account(s) and investment(s)					
	☐ Motor Vehicle(s) ☐	Other					
	☐ Debts (attach list)						
12	. My grounds for absolute divorce	are: (check all that apply)					
	☐ Two-Year Separation - From separate and apart from each of intercourse, for more than two	n on or about, my spouse and I have lived other in separate residences, without interruptions, without sexual o years and there is no reasonable expectation that we will reconcile.					
	without interruption, without	n on or about, my spouse and I by mutual and ed separate and apart from one another in separate residences, sexual intercourse, for more than 12 months with the express our marriage, and there is no reasonable expectation that we will					
	☐ Adultery - My spouse commi	itted adultery.					
	abandoned and deserted me, v	with the intention of ending our marriage. This abandonment has a for more than 12 months and there is no reasonable expectation					

□ Co	nstructive Desertion - I left my spouse because his/her cruel and vicious conduct made the
	tinuation of our marriage impossible, if I were to preserve my health, safety, and self-respect. This
	duct was the final and deliberate act of my spouse and our separation has continued without
inte	rruption for more than 12 months and there is no reasonable expectation that we will reconcile.
_	minal Conviction of a Felony or Misdemeanor - On or about
	use was sentenced to serve at least three years or an indeterminate sentence in a penal institution
_	has served 12 or more months of the sentence.
	elty/Excessively Vicious Conduct Against Me or my minor child - My spouse has persistently
	ed me or my minor child cruelly and has engaged in excessively vicious conduct rendering
	inuation of the marital relationship impossible if I am to preserve my health, safety, and
	respect, and there is no reasonable expectation that we will reconcile.
_	
Ins	anity - On or about, my spouse was confined to a mental institution, pital, or other similar institution and has been confined for 3 more years. Two doctors competent in
	chiatry will testify that the insanity is incurable and there is no hope of recovery. My spouse or I
	e been a resident of Maryland for at least two years before the filing of this complaint.
FOR	THESE REASONS, I request (check all that apply):
_	An Absolute Divorce
	A change back to my former name: Full Former Name
	Sole One Joint physical custody of the minor child(ren).
	☐ Sole ☐ Joint legal custody of the minor child(ren).
	(Check One) Visitation with the minor child(ren).
	Use and possession of the family home for up to three years from the date of the divorce.
	Use and possession of the family use personal property for up to three years from the date of the
_	divorce.
	Child support (Attach Form DOM REL 30 or DOM REL 31).
	Health insurance for the child(ren).
□	Health insurance for me.
	My share of the property or its value.
	Transfer of family use personal property.
닏	A monetary award (money) based on marital property.
U	Alimony (Attach Form DOM. REL 31).
	Any other appropriate relief.
	I,, solemnly affirm under the penalties of
	perjury, that the contents of this document are true to the best of my knowledge, information and
	belief.
	Date Signature